

SERFF Tracking Number: META-125631415 State: Arkansas
Filing Company: Metropolitan Property & Casualty Company State Tracking Number: EFT \$50 & \$100
Company Tracking Number: B07-68 GJ (RR)
TOI: 33.0 Other Lines of Business Sub-TOI: 33.0002 Other Commercial Lines
Product Name: Group Legal Services Insurance administered through Hyatt Legal Plans
Project Name/Number: MP&C GLSP 07 P/B07-68 GJ

Filing at a Glance

Company: Metropolitan Property & Casualty Company

Product Name: Group Legal Services Insurance SERFF Tr Num: META-125631415 State: Arkansas

administered through Hyatt Legal Plans

TOI: 33.0 Other Lines of Business

SERFF Status: Closed

State Tr Num: EFT \$50 & \$100

Sub-TOI: 33.0002 Other Commercial Lines

Co Tr Num: B07-68 GJ (RR)

State Status: Fees verified and received

Filing Type: Rate

Co Status: In Progress

Reviewer(s): Betty Montesi,
Llyweyia Rawlins, Brittany Yielding

Authors: Sandra Bennett, Ruth
Rivera, Linda Williams

Disposition Date: 05/09/2008

Date Submitted: 05/02/2008

Disposition Status: Exempt from Review

Effective Date Requested (New): 01/01/2009

Effective Date (New): 01/01/2009

Effective Date Requested (Renewal):

Effective Date (Renewal):

State Filing Description:

General Information

Project Name: MP&C GLSP 07 P

Status of Filing in Domicile: Pending

Project Number: B07-68 GJ

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 05/09/2008

Deemer Date:

State Status Changed: 05/09/2008

Corresponding Filing Tracking Number:

Filing Description:

This is a Group Legal Services Insurance Rate Filing. The forms are being submitted via SERFF tracking number META-125631414.

SERFF Tracking Number: META-125631415 State: Arkansas
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Company and Contact

Filing Contact Information

Susan Bajusz, Senior Contract Analyst
 501 Route 22 (908) 253-2120 [Phone]
 Bridgewater, NJ 08807

Filing Company Information

Metropolitan Property & Casualty Company CoCode: 241 State of Domicile: Rhode Island
 700 Quaker Land Group Code: 241 Company Type: Property &
 Casualty Company
 Warwick, RI 02887 Group Name: State ID Number:
 (908) 253-2753 ext. 2753[Phone] FEIN Number: 13-2725441

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation: 50.00 per Rate filing
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Metropolitan Property & Casualty Company	\$50.00	05/02/2008	20070006
Metropolitan Property & Casualty Company	\$100.00	05/09/2008	20190313

SERFF Tracking Number: META-125631415 State: Arkansas
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Exempt from Review	Llyweyia Rawlins	05/09/2008	05/09/2008

SERFF Tracking Number: META-125631415 State: Arkansas
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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Accepted for Informational Purposes	Yes
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Accepted for Informational Purposes	Yes
Supporting Document	NAIC loss cost data entry document	Accepted for Informational Purposes	Yes
Supporting Document	Actuarial Memo	Accepted for Informational Purposes	No
Supporting Document	AR ERS filing letter	Accepted for Informational Purposes	Yes
Rate (revised)	MPC-Estate Resoluiton Service Actuarial Memo	Accepted for Informational Purposes	No
Rate	MPC-Estate Resoluiton Service Actuarial Memo	Accepted for Informational Purposes	No

SERFF Tracking Number: *META-125631415* *State:* *Arkansas*
Filing Company: *Metropolitan Property & Casualty Company* *State Tracking Number:* *EFT \$50 & \$100*
Company Tracking Number: *B07-68 GJ (RR)*
TOI: *33.0 Other Lines of Business* *Sub-TOI:* *33.0002 Other Commercial Lines*
Product Name: *Group Legal Services Insurance administered through Hyatt Legal Plans*
Project Name/Number: *MP&C GLSP 07 P/B07-68 GJ*

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: META-125631415 State: Arkansas
 Filing Company: Metropolitan Property & Casualty Company State Tracking Number: EFT \$50 & \$100
 Company Tracking Number: B07-68 GJ (RR)
 TOI: 33.0 Other Lines of Business Sub-TOI: 33.0002 Other Commercial Lines
 Product Name: Group Legal Services Insurance administered through Hyatt Legal Plans
 Project Name/Number: MP&C GLSP 07 P/B07-68 GJ

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-Property & Casualty
Review Status: Accepted for Informational Purposes 05/09/2008

Comments:
 Uniform Transmittal Document-Property & Casualty.

Attachment:
 Property & Casualty Transmittal form 4-8-08.pdf

Bypassed -Name: NAIC Loss Cost Filing Document for OTHER than Workers' Comp
Review Status: Accepted for Informational Purposes 05/09/2008

Bypass Reason: N/A

Comments:

Bypassed -Name: NAIC loss cost data entry document
Review Status: Accepted for Informational Purposes 05/09/2008

Bypass Reason: N/A

Comments:

Satisfied -Name: AR ERS filing letter
Review Status: Accepted for Informational Purposes 05/09/2008

Comments:
 AR ERS filing letter.

Attachment:
 AR ERS filing letter.pdf

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only a. Date the filing is received: b. Analyst: c. Disposition: d. Date of disposition of the filing: e. Effective date of filing: New Business Renewal Business f. State Filing #: g. SERFF Filing #: h. Subject Codes
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3. Group Name	Group NAIC #
Metropolitan Property and Casualty Insurance Company ("MPC")	

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Met Property and Casualty Ins. Co.	RI	241-26298	13-2725441	

5. Company Tracking Number	MP&C GLSP 07 P
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Susan Bajusz MetLife 501 Route 22 Bridgewater, NJ 08801	Senior Consultant Contract	908-253-2120	908-253-2126	sbajusz@metlife.com

7. Signature of authorized filer	
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8. Please print name of authorized filer	Susan Bajusz
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Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	Property and Casualty
10. Sub-Type of Insurance (Sub-TOI)	Legal
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	Group Estate Resolution Service
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input checked="" type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description) Explanation of Variables
14. Effective Date(s) Requested	New: 1/1/09 Renewal:
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

16.	Reference Organization (if applicable)	
17.	Reference Organization # & Title	
18.	Company's Date of Filing	
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	MP&C GLSP 07 P						
21.	<p>Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]</p> <p>We enclose for filing, final printed copies of the group legal services insurance forms described below. These forms are new and do not replace any forms previously filed with the Department.</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 30%;">Form Number</th> <th style="text-align: left;">Description</th> </tr> </thead> <tbody> <tr> <td>MP&C GLSC 07 P</td> <td>The Group Policy to be issued to a policyholder to provide insurance for estate resolutions as a covered legal service for their certificateholders on a non-contributory basis.</td> </tr> <tr> <td>MP&C GLSP 07 P</td> <td>The Certificate that is issued to a participating certificateholder and the legal service insurance provided under the Group Policy.</td> </tr> </tbody> </table> <p>These forms are designed for issue to employer, labor union or association groups. When issued, the Policyholder will receive the Policy. The individual participant will receive the Certificate. The forms may be printed in another format such as continuous text or booklet. The proposed effective date for this filing is January 1, 2009.</p>		Form Number	Description	MP&C GLSC 07 P	The Group Policy to be issued to a policyholder to provide insurance for estate resolutions as a covered legal service for their certificateholders on a non-contributory basis.	MP&C GLSP 07 P	The Certificate that is issued to a participating certificateholder and the legal service insurance provided under the Group Policy.
Form Number	Description							
MP&C GLSC 07 P	The Group Policy to be issued to a policyholder to provide insurance for estate resolutions as a covered legal service for their certificateholders on a non-contributory basis.							
MP&C GLSP 07 P	The Certificate that is issued to a participating certificateholder and the legal service insurance provided under the Group Policy.							
22.	<p>Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]</p> <p>Check #: Amount:</p> <p>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p>							

***Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

FORM FILING SCHEDULE

(This form must be provided **ONLY** when making a filing that includes forms)
 (Do **not** refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	MP&C GLSP 07 P
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2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)	
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3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement Or withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	Noncontributory Legal Services Group Policy	MP&C GLSP 07P	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02	Legal Services Noncontributory Certificate	MP&C GLSC 07P	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		

PC FFS-1

RATE/RULE FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	MP&C GLSP 07 P
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2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	
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Rate Increase
 Rate Decrease
 Rate Neutral (0%)

3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)	
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4a.	Rate Change by Company (As Proposed)
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Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)

4b.	Rate Change by Company (As Accepted) For State Use Only
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Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change	Minimum % Change

5.	Overall Rate Information (Complete for Multiple Company Filings only)
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		COMPANY USE	STATE USE
5a	Overall percentage rate indication (when applicable)		
5b	Overall percentage rate impact for this filing		
5c	Effect of Rate Filing – Written premium change for this program		
5d	Effect of Rate Filing – Number of policyholders affected		

6.	Overall percentage of last rate revision	
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7.	Effective Date of last rate revision	
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8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	
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9.	Rule # or Page # Submitted for Review	Replacement or withdrawn?	Previous state filing number, if required by state
01	See Actuarial Memo	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
02		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
03		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	

Metropolitan Life Insurance Company
501 U.S. Highway 22 West, Area
Bridgewater, NJ 08807
Tel 908 253-2120 Fax 908 253-2126
sbajusz@metlife.com



Susan Bajusz
Senior Contract Consultant
Institutional Contracts Development

May 2, 2008

Arkansas Department of Insurance
1200 West 3rd Street
Little Rock, Arkansas 72201-1904

Re: METROPOLITAN PROPERTY AND CASUALTY INSURANCE COMPANY
Filing No. MP&C GLSP 07 P, et al.
Group Legal Services Insurance administered through Hyatt Legal Plans, Inc., an affiliate of
Metropolitan Property and Casualty Company
Our NAIC Company No. is 241-26298
Our FEIN is 13-2725441

Dear Sir/Madam:

We enclose for filing, final printed copies of the group legal services insurance forms described below. These forms are new and do not replace any forms previously filed with the Department.

The forms are as follows:

MP&C GLSP 07 P	The Group Policy to be issued to a group policyholder to provide insurance for the estate resolution covered legal service for certificateholders on a non-contributory basis. The Group Policy describes the legal service that is provided.
MP&C GLSC 07 P	The Certificate to be issued to all eligible certificateholders when legal service insurance is provided on a non-contributory basis. The Certificate evidences the legal service insurance provided under the Group Policy.

These forms are designed for issue to employer, labor union or association groups. When issued, the Policyholder will receive the Policy. The individual participant will receive the Certificate.

With respect to the above group policy form MP&C GLSP 07 P, we would like to provide the Department with additional information we believe will help clarify the intention of certain provisions in this form. Specifically, we call your attention to the provisions entitled "Participation Fees" and "Grace Period".

In the "Participation Fees" provision, we have stated that the participation fees are to be paid by MetLife to the insurer Metropolitan Property & Casualty Insurance Company (Metropolitan) rather than such fees being paid by the policyholder as is typically the case. The reason for this language, is that Metropolitan, an affiliate of MetLife, has agreed to an arrangement with MetLife to offer group will service under the subject forms, without cost, to persons insured for a certain coverage under the policyholder's plan of group insurance with MetLife. MetLife in turn will pay the premium to Metropolitan Property and Casualty Insurance Company (Metropolitan) on behalf of the policyholder. Such participation fee payment arrangement is properly disclosed in the group life insurance certificate issued to such insured persons under the referenced group plan with MetLife. Such disclosure wording is the subject of a separate submission to the life insurance section of your Department.

B07-68 GJ

With respect to the "Grace Period" provision, we have stated only that the policy will not be terminated due to MetLife's failure to pay the participation fees to Metropolitan. We believe that such language is appropriate in the context of the participation fee payment arrangement described in the above paragraph.

In addition, the "Entire Contract" provision that appears on page 3 of the policy, MP&C GLSP 07 P, states that we will not use any information in any application to deny coverage under the policy. As such, we do not intend to make any application part of the policy, and therefore none is included in this filing.

Text that is subject to variation has been indicated by brackets. An Explanation of Variable Material is enclosed.

The officer signing below certifies that the enclosed forms achieve Flesch Reading Ease Scores of:

MP&C GLSP 07 P - 52.3

MP&C GLSC 07 P - 50.1

The attached actuarial memoranda explain in detail the rates that will be used in conjunction with the subject forms. Please keep the actuarial memoranda confidential to the extent allowable by law.

The required filing fee is enclosed.

Please address all correspondence regarding this filing to my attention. If you have any questions or comments that you feel could best be handled by contacting me, please feel free to do so via telephone, fax or e-mail (see upper left-hand corner of page 1 of this letter).

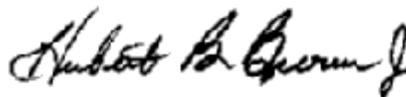
Re: Filing Correspondence Instructions

Please direct any questions, comments or correspondence regarding this filing to me. I look forward to hearing from you.

Very Truly Yours,



Susan Bajusz
Senior Contract Analyst



Herbert B. Brown Jr.
Vice President